specifications **for** optical switches and site preparations, and developing operating procedures, articles of incorporation (if needed), and all budgets **for** the network.

The working group has developed a detailed scope statement and technical requirements for implementation (Appendix B). This same HSSC working group has also assisted in the development of detailed plans for expanding the fiber backbone using a combination of Ethernet/MPLS, Frame Relay, Private Line TI and WiMAX wireless clouds to the smaller rural communities with the goal of connecting as many rural care providers across the state as possible. See the following sections for more details and Appendix D for diagrams.

SCLR Backbone

Fiber Discovery and Network Equipment Infrastructure

The network-working group has received a **report** from FiberCo, LLC, (Appendix C) identifying fiber assets in South Carolina and estimating costs to secure long-term leases for those assets. (FiberCo is a not-for-profit subsidiary of Internet2/NLR.) The network **as** currently designed will require approximately 1000 miles of fiber (two pairs) throughout **the** state. The working group also has engaged in non-disclosure discussions with SCANA Communications, Level3, and DukeNet about additional fiber assets that maybe available for this network.

Specifications have been written and cost estimates prepared for optical switches and equipment necessary to connect the initial phases of the network, to include all six HSSC sites and regional and national networks. The network design will readily allow for ethernet local loop circuits and WiMAX expansion and inclusion of additional participants such as the more than thirty rural hospitals and the nineteen community health centers that are part of the SC Primary Care Health Providers Association, as well as, hundreds of community based physician practices across the state.

Fiber Network Development

Plans have been developed identifying all switch sites of the network across South Carolina. The SCLR fiber network will have optical switches serving **as** hubs through which other hospitals, community heath centers, clinics, health departments, and office based practices may connect to the network. The backbone of PSPN, the SCLR will be a scalable DWDM (dense wave division multiplexing) **or** lit **fiber** network capable of increasing bandwidth on demand.

PSPN Pilot Program

<u>Overview</u>

The Palmetto State Provider Network initiative proposes a high-speed data network linking rural non-profit healthcare providers **across** the four regions of the state (Upstate, Midlands, PeeDee, and Lowcountry) to the academic and large tertiary medical center. PSPN will be **an** extrapolation of the **SC** Light Rail as discussed earlier. Once connected, **these** rural care providers will have access to high speed commercial Internet, Internet2/NLR, and medical knowledge centers across the state. This network will be comprised of high capacity Ethernet local loops and Gigabit / 10Gb Ethernet/wavelength long haul circuits. A majority of the infrastructure required to assemble this network is commercially available, but to date has not been utilized for advanced healthcare applications due to costs.

Network Architecture

The telecommunication component of the PSPN will be a extrapolation/expansion of SCLR, **the** fiber optics backbone, out to **the** following South Carolina rural communities: Beaufort, Walterboro, Summerville, Georgetown, Kingstree, Myrtle Beach, Conway, Allendale, Bamberg, Sumter, Darlington, Bennettsville, Camden, Newberry, Laurens, Greenwood, Orangeburg, Florence, Mullins, Aiken, Rock Hill, Anderson, Greer, Easley, Rock Hill, Chester, Union, and Gaffney (PSPN Network map: Appendix D). Most of theses communities are under 25,000 in population. The PSPN links off of the SCLR will use a combination of Metro Ethernet/MPLS, Frame Relay, Private Line TI and WiMAX wireless (where available) to provide the bandwidth needed. These links will establish 2nd tier point-of-presence (POPs) for the PSPN, usually located in the area rural hospital. If WiMax is available, around each of the more than thuty POPs we will establish a WiMAX wireless telecommunications cloud to which care givers within a thirty-mile radius can connect to the PSPN. This **effort** will provide sufficient broadband connections for rural hospitals, community health centers and office based practice to large tertiary centers, academic medical centers and out to the "world." The broadband links of PSPN will encourage and enhance existing tele-medicine programs (radiology, cardiology, peds, etc.) and tele-health activities from the state's two academic medical centers to rural providers.

Thirty two (32) rural healthcare facilities (hospitals) across the state will be served by this proposed network. Access will be offered in 10 Mb Ethernet connection speed. The rural hospitals are dispersed across the four regions of South Carolina and will connect to core routers to be located across the state. Connectivity to commercial Internet and NLR or Internet2/NLR will be available through this core router via a dedicated high-speed connection through SCLR to Atlanta, GA. A detailed survey has been conducted on each facility to ensure that network facilities are available to provide the desired connectivity. The basic design of this network will allow other eligible healthcare facilities and providers to ultimately connect to the network through hubs to be established at each rural hospitals/community health center.

Reaional Connections

In addition to access to external research networks like Internet2/NLR, we plan to establish direct connections to other networks in adjoining states, providing a regional exchange of information and services.

SelfSufficiency

Private and for-profit Medical service providers will be encouraged to connect to this network on a subscription basis to exchange traffic with the rural hospitals and access external applications and networks such as Internet2/NLR.

In addition to subscriptions from for-profit entities, the network will allow participating locations to access commercial Internet services via the same connection, displacing existing Internet access costs. The displacement of these expenses will enable the public/non-profit facilities to cover the costs of the network not funded by the grant. (15%) **Tris** will add to the sustainability of the network long term.

Physical PSPN Network Management

Management of the network and help-desk functions will be provided through a **centralized** network management group (vendor supplied). Proactive monitoring of network connections and VPNs will be accomplished with advanced network monitoring tools. Equipment placed at each subscriber site will allow remote troubleshooting and diagnostics. The proposed network will be monitored 7x24 and supported by a help desk to promptly resolve connection issues.

Network Security

The proposed network design includes protections designed to ensure very high levels of network security. Firewalls will be established at each location served preventing unauthorized access to other users or databases. A core router dedicated to this network will enable the exchange of information and appropriate peering with other networks.

X. Schedule and Budget¹⁰

<u>Schedule</u>

Milestones	Projected Date
RFI issued for SCLR	Nov 2006
Work with respective associations to identify SC rural hospitals, community health centers, physicians' offices	Nov 2006
Letters seeking support for application sent to providers	Dec 2006
Submit FCC pilot program proposal	April 2007
RFP issued for SCLR	May 2007
Select vendor for fiber optics backbone, SCLR	June 2007
Negotiate and sign contract for fiber backbone	July 2007
Work with respective SC healthcare association leadership to solicit provider participation in PSPN	July 2007
Establish PSPN Governance Board	July 2007
Establish PSPN Programmatic Advisory Committee	July 2007
PSPN Governance Board approve rural communities/towns to link to fiber backbone	August 2007
SCLR working group oversees SCLR implementation	August 2007
RFP issued for 32 Ethernet local loops & help desk function	August 2007
SCLR go live	August 2007
Negotiate and sign contract for local loops	September 2007
SCLR/PSPN working group oversees PSPN implementation	October 2007
PSPN go live	October 2007

<u>Budget</u>

Expenses Year 1

19GB (20 yr. IRU) with 12 link (help desk & NOC)	\$4,385,000
Connection to Internet2/NLR (one time)	200,000
Internet2/NLR Annual Membership	125,000
32 Ethernet Local Loop Circuits (help desk & NOC)	1,894,000
Administrative Costs	50,000
EHR Expense _	200,000
Total Year 1 Expenses	\$6,854,000

 $^{^{10}}$ Addresses application requirement #9 - Schedule and Budget

Revenue Year 1

RHC Funding
 HSSC Funding
 HSSC Funding
 Membership fees (for-profit)
 Total Year 1 Revenues
 \$5,783,400
 1,070,600
 50,000
 \$6,904,000

Expenses Year 2

10GB Fiber Maintenance & Recurring Costs (help desk & NOC)
Internet2/NLR Annual Membership
32 Ethernet Local Loop Circuits (help desk & NOC)
Administrative Costs
EHR Expense
Total Year 2 Costs

\$1,000,000
1,218,000
50,000
50,000

Revenue Year 2

RHC Funding
HSSC Funding
Membership fees (for-profit)

Total Year 1 Revenues

\$2,076,550
316,450
100,000
\$2,493,000

XI. Coordination of PSPN Tele-medicine Programs Throughout SC11

A detailed review of existing tele-medicine / tele-health services within the state has been conducted. It is anticipated that the existing programs will be enhance and improved with **the** availability of broadband connectivity. Rural caregivers (office based physicians, **community** health center, hospitals) will be surveyed to determine what type of services **that can** be provided to them via broadband would improve the delivery of care.

With the acute shortage of pediatric radiologists in the state, mal based OB/GYN physicians participating in PSPN will have access to the services of MUSC based pediatric radiologists who can do reads via the broadband network.

The intent is to offer to PSPN participating physicians access to a web based electronic health record (EHR). This offering would be in the form of an application service provider (ASP) model and at minimal annual cost to the provider. The PSPN will consider two EHRs; one developed by the State Office of Research and Statistics and the

Addresses application requirement #10 – Tele-medicine Coordination.

other developed by Dr. Brent Egan (MUSC) et al as part **of** an NIH funded statewide hypertension study.

The programmatic functions/activities of PSPN will be coordinated out of Health Sciences South Carolina, specifically by Dr. Roger Poston, Director of Academic and Research Computing in the Office of the CIO at the Medical University of SC. Dr. Poston has previous experience in **this** area at the Wake Forest / Bowman **Grey** School **of** Medicine. Dr. Robert Rainer, Medical Director at SRMC, will assist Dr. Poston in this effort. Dr. Poston will work closely with Dr. Rainer and the PSPN tele-health / telemedicine advisory committee consisting of ten members with representatives from Medical University of SC (MUSC), University of SC School of Medicine (USC SoM), Palmetto Richland Health System (PRHS), Greenville Hospital System (GHS), Spartanburg Regional Medical Center (SRMC), AHEC, South Carolina Primary Health Care Association (SCPHCA), SC Hospital Association (SCHA), and two rural-based primary care physicians. Many of the tele-medicine programs will imamate from the HSSC hospital facilities along with other tertiary centers across the state. Dr. Poston's role will be to work with rural caregivers to identify needs and to coordinate the needs back to academic and tertiary centers. This coordination effort will be in done with the tele-medicine advisory committee. Dr. Poston and the advisory committee will identify / establish baseline measures and metrics to monitor the success of the activities. Dr. Poston's time spent on this coordination effort will be part of HSSC's contribution to the PSPN.

Funding Model

In order to sustain PSPN as an ongoing initiative, HSSC is requesting that the following model be used:

- RHC fund 85% of the one time and 85% of first and second year recurring cost of the 1 OGB fiber optics backbone, SC Light Rail.
- HSSC and its three research universities will fund the ongoing support and enhancements of the fiber optics backbone.
- RHC fund 85% **of the** one time cost and 85% of the two year recurring cost of the second tier Ethernet local loops out to the rural hospitals.
- RHC fund 85% of the two year cost for the EHR.
- After year two, the sustaining costs of the second tier local loops and EHR will be
 provided through a combination of the following sources: RHC funding, if
 available, HSSC grant funds, a portion of the fees generated from the telemedicine/tele-health/remote ICU monitoring programs, fees collected from forprofit network members and other state (Health & Human Services) and Federal
 (Medicare & Medicaid) grants.

¹² Addresses application requirement #11 - Sustaining the Network.

Funding Request from RHC

Year 1 \$5,783,400 Year 2 \$2,076,550

It will be incumbent upon the PSPN governance board to work with the HSSC leadership and the programmatic advisory committee to develop specific funding strategies to support PSPN long term.

APPENDICES

GOVERNANCE

Article 1

The name of the network shall be the Palmetto State Providers Network (PSPN)

Article II

<u>Purpose:</u> The Palmetto State Providers Network (PSPN) is organized as a subsidiary of the Health Sciences South Carolina, an organization within the meaning of Section 501 (c)(3) of the Internal Revenue *Code*. The PSPN is constructed specifically for improving rural healthcare in the state of South Carolina.

Article III

<u>Directors:</u> **The** PSPN shall **be** governed by a Board of Directors (the Board) of not less than twelve members. **The** Board of Directors shall consist of members from the following organizations: HSSC (2), *SC* Hospital Association (2), *SC* Primary Health Care Association (2), AHEC (2), and four at *large* rural primary care physicians.

Each Director shall **be** appointed for a **three** year term and **serve** until his or her successor is duly appointed and qualified for the position **of** Director. **The** terms of Directors shall be staggered such that the terms of office of a pro rata number of the then serving Directors expire in any one year.

<u>Initial Directors:</u> **The** members of the initial Board of Directors shall consist of representatives of the following institutions, each of whom shall serve for the term beginning on the stated date **and** ending on the date stated and until his or her successor shall have been duly appointed and qualified for the position of Director. They will be appointed by the boards of the respective organizations:

Member Institutions
Health Sciences South Carolina
SC Primary Health Care Association
SC Hospital Association
SC Medical Association

<u>Addition of Directors:</u> Additional Directors may be added to the Board of Directors, the PSPN, **upon** official recognition of new institutions and organizations with participating

and collaborating members in the state of South Carolina. **The** President **or** Chief Executive Officer **of** the new and officially recognized organization **or** institution shall appoint their representative Director. The Director shall **serve** a **three** year term and until his or her successor shall have been duly appointed and qualified for the position of Director. Directors shall be staggered such that the terms of office of a pro rata number **of** then serving Directors expire in any one year.

<u>Compensation and Expenses of Directors</u>: Directors shall receive no compensation for their services as Directors, but may be reimbursed for their out-of-pocket expenses incurred in carrying out the business and affairs of **the** Board of Directors of the **PSPN**.

<u>Chair and Vice Chair</u>: The Board of Directors shall elect at its first regular meeting, by the majority of vote of all persons then serving as Directors, one of its members to **serve** as the Chair of the Board of Directors, PSPN. They shall also elect by like vote one other of its members to **serve** as Vice-Chair of the Board. Both the Chair and Vice-Chair shall be elected for one year terms and will **serve** until his **or** her respective successor has been duly elected and qualified. A Chair **or** a Vice-Chair may **serve** one **or** more terms of office. The Chair shall preside at all meetings of the Board of Directors and perform duties as usually pertain to the position of Chair. **The** Vice-Chair shall serve in the absence of the Chair and perform all further duties, which usually pertain to the position of Vice-Chair.

Meetings: The Board shall hold meetings at such place and time as determined by the Board. Meetings shall be conducted at least quarterly per year. Special meetings of the Board may **be** called by the Chair of **the** Board of Directors **or** by written request of at least one-half of the membership **of** the Board of Directors **of** the **PSPN**. Request for special meetings must be submitted in writing to the Chair and distributed either in writing or by phone call to the members of the Board of Directors, the **PSPN** at least **48** hours prior to **the** special meeting.

Quorum and Required Vote: At each meeting of the Board of Directors, the **PSPN**, the presence of one-half of **the** full number of Directors then serving **shall** constitute a quorum sufficient for the transaction of business. Any action of a majority of the Directors present at a meeting at which a quorum is present **shall** be the official act of the Board, except **as** may **be** otherwise specifically provided. In the event of a tie vote on any matter before the Board, a vote to break such a tie shall be cast by the Chair, **or** in his **or** her absence, by the Vice-Chair.

Conference Telephone Meeting: Directors may participate in a meeting of the Board by means of conference telephone, video conferencing or similar communications equipment whereby all persons participating in the meeting can hear each other, Participation in the meeting shall constitute presence in person.

<u>Article IV</u>

Removal of Director: Any Director, Chair or Vice-Chair may be removed from his or her respective position by a resolution duly adopted by two-thirds super-majority of all persons elected and then serving as Directors, whenever in their judgment the best interest of the PSPN will be served by such removal.

Resignation of Director. Chair or Vice-Chair: Any Director, the Chair or Vice-Chair of the Board may, at any time, resign from his/her respective position by giving written notice of his or her resignation. Such resignation shall take effect at the time specified in such notice, or, if no time is specified at the time of the Chair's receipt of such notice.

<u>Appointment of Reulacement Director:</u> In **the** event **of** death, resignation **or** removal **of** any Director, a new Director shall be appointed by the President **or** Chief Executive officer of the respective institution **or** organization.

Election of Reulacement Chair or Vice-Chair In the event of death, resignation or removal of the Chair of Vice-Chair of the Board, a new Chair or Vice-Chair may be elected by the Board of Directors by the same vote required by these policies and procedures to elect a Chair or Vice-Chair, for such term as is specified, but in no event longer than the remaining term of the position being succeeded, at the regular meeting of the Board following such death, resignation or removal, or at a special meeting of the Board of Directors called for such purpose.

Article V

<u>Committees</u>: Those committees not having and exercising the authority of the Board in the management of the PSPN may be designated by a resolution adopted by a majority of the Directors present at a meeting at which a **quorum** is present. Except as otherwise provided in such resolution, members of each such committee shall be members of the **PSPN** and appointed by the Board.

<u>Committee Chairs:</u> Except as otherwise provided, one member **of** each committee shall be appointed committee Chair by the person authorized to appoint that committee's membership, **or**, in lieu thereof, upon majority vote of all the members then serving on **such** committee.

<u>Vacancies</u>: **As** vacancies occur, the membership of any committee may be filled by appointments made in the same manner **as** provided in the case **of** the original **appointments**.

Quorum: Unless otherwise provided by the Board of Directors, a majority of the whole **committee** shall constitute a quorum and **the** act of a majority of the members present at **meeting** at which a quorum is present shall be the act of the committee.

APPENDIX B - SC LIGHT RAIL DESIGN DOCUMENT

SCLR Design Document



Project Name:	South Carolina Light Rail	
Project Manager	Kevin Gremann	
Project Sponsor	HSSC	
Date	6/29/2006	

Revision History

To the second	Validien	Date my pressures	Comments
1.0	Kevin Germann	06/13/2006	Original DRAFT

SCLR Project Summary

This project is the implementation of a high speed, high bandwidth South Carolina Light Rail. The network will utilize dark fiber and DWDM optical technologies. This network will support the needs of higher education for research and distance education and the needs of the Health Sciences South Carolina collaborative (HSSC).

The scope of this project is the design and implementation of the new network infrastructure and associated standards and business processes. The scope does not include the selection and migration of specific applications to the new infrastructure. Project closure will occur upon the acceptance of the new infrastructure by the project sponsor

Terms/Abbreviations/A

CWDM	Coarse Wave Division Multiplexing eight (8) or fewer wavelength channels	
DWDM	Dense Wavelength Division Multiplexing an optical technology used to increase bandwidth over existing fiber optic backbones	
SCLR	South Carolina Light Rail	
SME	Subject Matter Expert	

Business Requirements

Business Requirement 1

Provide dynamic bandwidth allocation across the entire DWDM network

Business Requirement 2

SCLR have the ability to provide dedicated circuits for stand alone projects as well as
projects that span a group of researches.

Business Requirement 3

• Support large data transfer such as multimedia requirements.

Business Requirement 4

Provide QOS

Business Requirement 5

Provide a 24x7 redundant network

Business Requirement 6

• Provide segregated, isolated traffic upon demand.

Business Requirement 7

Establish Network Operations Center (NOC)

Business Requirement 8

• Establish monitoring tools to be accessible by all members

Business Requirement9

• Provide a "Trouble Ticket System"

Business Requirement 10

• Establish a video conferencing infrastructure (gateways, etc)

Business Requirement 11

Provide/establish security standards (HIPAA, FERPA, GLB)

Business Requirement 12

• Create the ability to add new sites (aggregation points)

Business Requirement 13

 Aggregation – Internet. Internet 2, NLR (this is the one bullet that begins with a noun instead of a verb; consistency is best)

Business Requirement 14

Complete documentation for the entire network architecture

SCLR Project Definition Section

Obiectives & Approaches

Work sessions have been held with stakeholders and SME's to determine the business requirements, objectives, and technical approaches for this phase. They consist of the following components:

Business Reauirement 1:

Provide dynamic bandwidth allocation across the entire DWDM network.

Objective *I*:

- Obtain optical hardware vendor
- o Define bandwidth increments (i.e. 1GB, 2.5G)
- o **Define SLA** (i.e. time to respond, cost, QOS, duration)
- o Obtain web based scheduling tool (user request & NOC setup)

Approach 1:

- o Define short list of vendors
 - Develop hardware requirements for RFQ

- Determine procurement method (exp. Best Value)
- Determine evaluation criteria
- Determine procurement and funding
- Write the standard (best practices)
 - Definedelivery interface
 - Define committee to focus on SLA's
- Define SLA's needed
 - Define parts of SLA's (metrics/assessment)
 - SCLR responsibilities
 - Institution/member responsibilities
- o Buy/build user-side scheduling tool workflow (interface with vendor tool)
 - Define short list of vendors
 - Develop hardware requirements for RFQ
 - Determine procurement method (exp. Best Value)
 - Determine evaluation criteria
 - Determine procurement and funding
 - Configure tool (NOC piece)

Business Requirement 2

 SCLR have the ability to provide dedicated circuits for stand alone projects as well as projects that span a group of researches.

Obiective 2

- a Obtain optical hardware vendor
- o Create an application review board (expectations and needs assessment)
- Determine capacity management / governance ,,, "who can get what" and how long
- o Create setup checklist
- o Create provisioning procedures

Approach 2:

- o Define short list of vendors
 - Develop hardware requirements for RFQ
 - Determine procurement method (exp. Best Value)
 - Determine evaluation criteria
 - Determine procurement and funding
- o Setup membership of application review board (charter procedure)
 - Develop a checklist to use during interview with requester
 - Determine evaluation criteria
- Develop cost recovery model ("what's free, what's extra")
 - Develop procedure
 - Define basic level of service (included in membership fee) and enhanced/extra services (available for extra price)
- o Create the checklist
 - Develop customer site survey
- o Create procedure for provisioning

Business Requirement 3:

• Support large data transfer such as multimedia requirements.

Objective 3:

- o Define vendor requirements for optical hardware.
- o Define protocols
- o Create IP addressing (V.4 or V.6) standards and procedures
- o Create routing standards and procedures

Approach 3:

- Defineshort list of vendors
 - Develop hardware requirements for RFQ
 - Determine procurement method (exp. Best Value)
 - Determine evaluation criteria
 - Determine procurement and funding

Business Reauirement 4

Provide QOS

Objective 4:

- Establish standards
- o Adhere to ITIL practices
- o Create IP addressing (V.4 or V.6) standards and procedures
- Create routing standards and procedures

Approach 4:

- o Define traffic types and assign priority to types
- o Develop standards and procedures

Business Reauirernent 5

Provide a 24x7 redundant network.

Objective 5:

- o Develop pathways
- o Definehardware
- o Define power backup generator
- o Develop staffing requirements
- o Define redundant connections for Internet. Internet 2, NLR

Approach 5:

- o Research existing fiber discovery
 - Develop backbone design (fiber plant)
 - Define level of redundancy required
 - Define short list of vendors
 - Develop hardware requirements for RFQ (all hardware. all sites)
 - Determine procurement method (exp. Best Value)

nd

- Determine evaluation criteria
- Determine procurement and funding
- Conduct risk assessment
- o Define skill requirements
 - Define staffing levels and funding
- Determine level of redundancy
 - Define aggregation points
 - Select vendor ISP's
 - Negotiate rates
 - Procure

Business Reauirement6

Provide segregated, isolated traffic upon demand

Objective 6:

- o Obtain optical hardware vendor
- o Create a application review board (expectations and needs assessment)
- Determine capacity management / governance ,,, "who can get what" and how long
- o Create setup checklist
- Create provisioning procedures
- Create standards and procedures
- Develop inter-institution VLAN support

Approach 6:

Develop procedures and standards

Business Reauirement 7:

Establish Network Operations Center (NOC).

Objective 7:

- Obtain location and physical space requirements
 - Develop USC as primary NOC, integrate with existing NOC's)
 - Develop design and funding (equipment and staffing)
 - Develop facilities requirements
 - Develop staff requirements
 - Creation of standards and procedures
- o Obtain location and physical space requirements for Future Needs
 - Develop separate NOC/ computer center
- Determine metrics and monitoring tools needed for NOC

Approach 7:

- Assign task team
 - Establish requirements (Present and future) including M & M
 - Conduct site visits
 - Establish agreement with USC NOC regarding present and future sites

- o Determine document requirements
- o Identify and secure new location
- Develop cost estimates (equipment and staffing)
- o Build and test
- o Develop policies and procedures
- o Hire and train staff

Business Requirement 8:

Establish monitoring tools to be accessible by all members

Obiective &

- o Define types of monitoring tools needs
- Identify existing monitoring tools
- o Develop non-existing monitoring tools
 - Policies and procedures
- o Develop implementation and training plan
- o Identify reporting requirements (What, Who, When)
 - Periodic review and assessment
 - Capable of event notification

Approach 8:

- o Determine document requirements
- o Evaluate existing solutions
- o Conduct site visits and check references
- o Develop cost estimates (equipment and staffing)
- o Purchase and implement
- o Hire and train staff
- o Build and test
- o Develop policies and procedures
- Provide a "Trouble Ticket System"

Objective 9

- o Define requirements
- o Evaluate current system in place at USC
 - Incorporate, or create new
- o Develop funding for equipment and ongoing maintenance cost
- Create policies and procedures for Backup NOC
- o Create reporting and documentation processes
- Define accessibility standards and procedures

Approach 9:

- o Determine document requirements
- Evaluate existing solutions
- Conduct site visits and check references
- o Develop cost estimates (equipment and staffing)
- o Purchase and implement
- Hire and train staff

- o Build and test
- o Develop policies and procedures

Business Reauirement 10:

• Establish a video conferencing infrastructure (gateways, etc)

Objective 10:

- o Create an inventory of existing system and network
- Define limits of this project in terms of UTC system (gateways, gate keepers, endpoints
- o Create funding requirements (incl. equipment and staff)
- o Determine integration into campus education communities, research and patient care.
- o Develop management and maintenance methods.
- o Creation of standards and policies and procedures
- o Define reporting and documentation standards
- o Establish the metrics and monitoring methods
- o Define QOS standards in regards to video conferencing

Approach 10:

- o Establish a task group
 - Assign authors and contributors
- o Establish and inventory of present environment
- o Establish QOS practices

Business Reauirement 11:

• Provide/establish security standards(HIPAA, FERPA. GLB)

Objective 11:

- o Establish a security sub-committee to address the following:
 - Analysis
 - Inventory systems and practices
 - Security education (HIPAA)
 - Protocols and practices(P&P)
 - Design in ... intrusion prevention and detection and response
- o Develop encryption standards

Approach 11:

- Appoint security task group
 - Analysis
 - Inventory systems and practices
- o Turn over security to ongoing operation group

Business Reauirement 12:

Create the ability to add new sites (aggregation points)

Objective 12:

- o Establish a DWDM network with sufficient capacity for expansion (Growth)
- o Define process and specifications for connecting new entities.
 - (Equipment, protocols, acceptable use, policies, costs, limits, SLA's)

Approach 12:

- o Design network topology
- o Acquire 'dark fiber'
- o Purchase optical hardware
- o Configure install and test

Business Requirement 13:

o (? Verb from page 39) Aggregation – Internet, Internet 2, NLR)

Objective 13:

- o Determine network aggregation types (TI, DS3, Metro Ethernet)
- o Provide the ability to connect external network providers to SCLR
 - Cost recovery model
- o Provide routing to aggregation points from member institutions

Approach 13:

- o Negotiate ISP contracts with vendors
- Connect SCLR to Internet, Internet 2, NLR
- o Provide routes to members

Business Requirement 14:

Complete documentation for the entire network architecture.

Obiective 14:

- o Provide documentation for the following key areas:
 - Hardware (existing)
 - VLAN's and subnets
 - Protocols
 - Authentication methods

Approach 14:

- Select documentation coordinator
- Create documentation repository
- SOP = mandate complete documentation at design, build and change events (change management)



FIBER DISCOVERY REPORT

PREPARED BY FIBERCO

BASED ON

HSSC NETWORK REQUIREMENTS

Date: June 21,2006

Research Long Haul networks with all or sub-sets of required inter-city fiber:

- Determine whether dark fiber may be sold
- Determine any available pricing for Fiber, Collocation, and Operations & Maintenance
- Determine basic technical and operational description of available fiber
- Research any Metro networks in each market
- Determine whether dark fiber may be sold
- Determine any available pricing for Fiber and Operations & Maintenance
- Research requirements for building laterals construction in each market
- Determine whether existing building laterals exist with available fiber
- Provide budgetary cost and duration estimates for construction of laterals (where required)

"Lit Services" Discovery (included in Fiber Discovery):

Research providers who would be best placed to provide Lit Services (assume services consist **of** variations **of** GigE and/or SONET-based wavelength services)

- Establish list of primary providers (single point of contact to source network)
- Establish list of secondary providers (providers with only partial ability/coverage)
- Determine budgetary pricing and implementation duration for Lit Services
- Output: Overview Report
- Description and pricing of Fiber Discovery alternatives
- Description and pricing of Lit Services alternatives

Methodology

We researched facilities-based telecommunications providers with significant network resources in South Carolina. All providers were contacted directly to determine their available fiber network assets, as well as review their business strategy in terms of making them available for sale.

None of the providers surveyed who can provide either long haul and/or metro dark fiber are able to provide a complete dark fiber solution using their own existing infrastructure.

The primary reasons are:

Do not have sufficient inventory on existing long-haul routes